

Image# 202301299575119779

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Miller, YueXin, , ,			2. Candidate's FEC Identification Number S4NY00297	
(b) Address (number and street) 315 west 36th Street 18B		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code New York NY 10018		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation AMERICAN INDEPENDENT PA	5. Office Sought Senate	6. State & District of Candidate NY 00		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2023 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) TV ERA SOCIAL DISTANCING HEALTH TASKFORCE COMMITTEE		
(b) Address (number and street) 315 west 36th street 18B		
(c) City, State, and ZIP Code New York NY 10018		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Miller, YueXin, , , <i>[Electronically Filed]</i>	Date 01/29/2023
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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